

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

SECRETARY OF THE SENATE

11 OCT 11 PM 3:31

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Friends of Sessions Senate Committee Inc.

ADDRESS (number and street)

P.O. Box 4278

☐ Check if different than previously reported. (ACC)

Montgomery

AL

36103

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00306704

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

AL

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☒

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the State of

5. Covering Period

07

01

2011

through

09

30

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Anita Barrera

Signature of Treasurer

Date

10

07

2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only

FEC FORM 3
(Revised 02/2003)

FE5AN018

11020370494

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Friends of Sessions Senate Committee Inc.

Report Covering the Period:

From:

MM
07

DD
01

YYYYYY
2011

To:

MM
09

DD
30

YYYYYY
2011

COLUMN A
This Period

COLUMN B
Election Cycle-to-Date

6. Net Contributions (other than loans)

(a) Total Contributions
(other than loans) (from Line 11(e)).....

4560.00

102183.00

(b) Total Contribution Refunds
(from Line 20(d)).....

0.00

0.00

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a)).....

4560.00

102183.00

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17).....

20718.15

601243.04

(b) Total Offsets to Operating
Expenditures (from Line 14).....

0.00

53051.20

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a)).....

20718.15

548191.84

8. Cash on Hand at Close of
Reporting Period (from Line 27).....

2868048.18

9. Debts and Obligations Owed **TO**
the Committee (Itemize all on
Schedule C and/or Schedule D).....

0.00

10. Debts and Obligations Owed **BY**
the Committee (Itemize all on
Schedule C and/or Schedule D).....

0.00

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name
Friends of Sessions Senate Committee Inc.

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	1

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	250.00	38980.00
(i) Itemized (use Schedule A).....	310.00	4433.00
(ii) Unitemized.....	560.00	43413.00
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	4000.00	58770.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	4560.00	102183.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	53051.20
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	5835.38	125969.82
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	10395.38	281204.02

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	20718.15	601243.04
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	120000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	10500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	20718.15	731743.04

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2878370.95
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	10395.38
25. SUBTOTAL (add Line 23 and Line 24).....	2888766.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	20718.15
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2868048.18

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 30

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

Full Name (Last, First, Middle Initial)

American Apparel Inc Defense Readiness

Mailing Address PAC

P. O. Box 1310

City

Selma

State

AL

Zip Code

36702

FEC ID number of contributing
federal political committee.

C C00486431

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY
07 / 27 / 2011

Transaction ID: 11003.C39497

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

Honeywell International PAC

Mailing Address 101 Constitution Ave. NW
Suite 500 W.

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C C00096156

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
09 / 29 / 2011

Transaction ID: 11003.C39496

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

WYLE PAC

Mailing Address 1960 E. Grand Avenue, Suite 900

City

El Segundo

State

CA

Zip Code

90245-5092

FEC ID number of contributing
federal political committee.

C C00493031

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
09 / 21 / 2011

Transaction ID: 11003.C39494

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

4000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 30

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

A.

Full Name (Last, First, Middle Initial)

Roy E. Smith

Mailing Address 208 Robin Circle

City

Gadsden

State

AL

Zip Code

35904

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Retired

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY
09 / 21 / 2011

Transaction ID: 11003.C39492

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ►

250.00

TOTAL This Period (last page this line number only) ►

250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 30

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

A.

Full Name (Last, First, Middle Initial)

Auburn Bank

Mailing Address 1717 South College Street

City

Auburn

State

AL

Zip Code

36832-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary

☐ General

☐ Other (specify)▼

Election Cycle-to-Date ▼

6892.99

Date of Receipt

MM / DD / YYYY
09 / 14 / 2011

Transaction ID: 11007.C39516

Amount of Each Receipt this Period

394.46

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Note: Interest Income

B.

Full Name (Last, First, Middle Initial)

BBVA Compass

Mailing Address 2811 Eastern Bypass

City

Montgomery

State

AL

Zip Code

36111-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary

☐ General

☐ Other (specify)▼

Election Cycle-to-Date ▼

1369.35

Date of Receipt

MM / DD / YYYY
07 / 27 / 2011

Transaction ID: 11003.C39498

Amount of Each Receipt this Period

341.40

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

NOTE: Interest Income

C.

Full Name (Last, First, Middle Initial)

BankTrust

Mailing Address 4290 Carmichael Road

City

Montgomery

State

AL

Zip Code

36106-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary

☐ General

☐ Other (specify)▼

Election Cycle-to-Date ▼

8186.99

Date of Receipt

MM / DD / YYYY
07 / 30 / 2011

Transaction ID: 11007.C39512

Amount of Each Receipt this Period

2.07

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Note: Interest Income

SUBTOTAL of Receipts This Page (optional)

737.93

TOTAL This Period (last page this line number only)

11020370500

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 30

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

A.

Full Name (Last, First, Middle Initial)

BankTrust

Mailing Address 4290 Carmichael Road

City

Montgomery

State

AL

Zip Code

36106-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)▼

Election Cycle-to-Date ▼

8189.06

Date of Receipt

MM / DD / YYYY
08 / 30 / 2011

Transaction ID: 11007.C39513

Amount of Each Receipt this Period

2.07

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Note:Interest Income

B.

Full Name (Last, First, Middle Initial)

BankTrust

Mailing Address 4290 Carmichael Road

City

Montgomery

State

AL

Zip Code

36106-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)▼

Election Cycle-to-Date ▼

8191.19

Date of Receipt

MM / DD / YYYY
09 / 30 / 2011

Transaction ID: 11007.C39514

Amount of Each Receipt this Period

2.13

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Note:Interest Income

C.

Full Name (Last, First, Middle Initial)

Camden National Bank

Mailing Address P. O. Box 518

City

Camden

State

AL

Zip Code

36726-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)▼

Election Cycle-to-Date ▼

7416.93

Date of Receipt

MM / DD / YYYY
08 / 24 / 2011

Transaction ID: 11006.C39503

Amount of Each Receipt this Period

315.07

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

NOTE:Interest Income

SUBTOTAL of Receipts This Page (optional)

319.27

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 30

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

Full Name (Last, First, Middle Initial)

Camden National Bank

Mailing Address P. O. Box 518

City

Camden

State

AL

Zip Code

36726-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7574.46

Date of Receipt

MM / DD / YYYY
08 / 31 / 2011

Transaction ID: 11006.C39504

Amount of Each Receipt this Period

157.53

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

NOTE:Interest Income

Full Name (Last, First, Middle Initial)

Camden National Bank

Mailing Address P. O. Box 518

City

Camden

State

AL

Zip Code

36726-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7732.00

Date of Receipt

MM / DD / YYYY
09 / 21 / 2011

Transaction ID: 11003.C39495

Amount of Each Receipt this Period

157.54

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

NOTE:Interest Income

Full Name (Last, First, Middle Initial)

Touchstone Instl MM Fund

Mailing Address Wachovia Investments
420 North 20th Street

City

Birmingham

State

AL

Zip Code

35203-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4736.24

Date of Receipt

MM / DD / YYYY
09 / 30 / 2011

Transaction ID: 11007.C39521

Amount of Each Receipt this Period

3.81

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Note:Dividend Income

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

318.88

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 30

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

A.

Full Name (Last, First, Middle Initial)

First Citizens Bank

Mailing Address 40 Lafayette Street East

City

Hayneville

State

AL

Zip Code

36040-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)▼

Election Cycle-to-Date ▼

7998.97

Date of Receipt

MM / DD / YYYY
08 / 12 / 2011

Transaction ID: 11003.C39499

Amount of Each Receipt this Period

472.60

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

NOTE:Interest Income

B.

Full Name (Last, First, Middle Initial)

Max Credit Union

Mailing Address 400 Eastdale Circle

City

Montgomery

State

AL

Zip Code

36117-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)▼

Election Cycle-to-Date ▼

1064.34

Date of Receipt

MM / DD / YYYY
07 / 31 / 2011

Transaction ID: 11007.C39522

Amount of Each Receipt this Period

435.46

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Note:Interest Income

C.

Full Name (Last, First, Middle Initial)

Merchants Bank

Mailing Address 1901 College Street

City

Jackson

State

AL

Zip Code

36545-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)▼

Election Cycle-to-Date ▼

3860.90

Date of Receipt

MM / DD / YYYY
07 / 01 / 2011

Transaction ID: 11007.C39517

Amount of Each Receipt this Period

269.98

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Note:Interest Income

SUBTOTAL of Receipts This Page (optional)

1178.04

TOTAL This Period (last page this line number only)

11020370503

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 30

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

Full Name (Last, First, Middle Initial)

Merchants Bank

Mailing Address 1901 College Street

City State Zip Code
Jackson AL 36545-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)▼

Election Cycle-to-Date ▼

4140.73

Date of Receipt

MM / DD / YYYY
08 / 12 / 2011

Transaction ID: 11007.C39518

Amount of Each Receipt this Period

279.83

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Note:Interest Income

Full Name (Last, First, Middle Initial)

United Bank

Mailing Address 34354 US Highway 98

City State Zip Code
Lillian AL 36549-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)▼

Election Cycle-to-Date ▼

7742.69

Date of Receipt

MM / DD / YYYY
07 / 18 / 2011

Transaction ID: 11003.C39491

Amount of Each Receipt this Period

413.63

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

NOTE:Interest Income

Full Name (Last, First, Middle Initial)

United Bank

Mailing Address 34354 US Highway 98

City State Zip Code
Lillian AL 36549-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)▼

Election Cycle-to-Date ▼

8020.69

Date of Receipt

MM / DD / YYYY
08 / 09 / 2011

Transaction ID: 11007.C39515

Amount of Each Receipt this Period

278.00

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Note:Interest Income

SUBTOTAL of Receipts This Page (optional)

971.46

TOTAL This Period (last page this line number only)

11020370504

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 30

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

A.

Full Name (Last, First, Middle Initial)

Wells Fargo

Mailing Address Post Office Box 230517

City

Montgomery

State

AL

Zip Code

36123-0517

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)▼

Election Cycle-to-Date ▼

10903.26

Date of Receipt

MM / DD / YYYY
07 / 28 / 2011

Transaction ID: 11007.C39509

Amount of Each Receipt this Period

38.42

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Note: Interest Income

B.

Full Name (Last, First, Middle Initial)

Wells Fargo

Mailing Address Post Office Box 230517

City

Montgomery

State

AL

Zip Code

36123-0517

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)▼

Election Cycle-to-Date ▼

10938.80

Date of Receipt

MM / DD / YYYY
08 / 08 / 2011

Transaction ID: 11007.C39520

Amount of Each Receipt this Period

35.54

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Note: Interest Income

C.

Full Name (Last, First, Middle Initial)

Wells Fargo

Mailing Address Post Office Box 230517

City

Montgomery

State

AL

Zip Code

36123-0517

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)▼

Election Cycle-to-Date ▼

10979.47

Date of Receipt

MM / DD / YYYY
08 / 28 / 2011

Transaction ID: 11007.C39510

Amount of Each Receipt this Period

40.67

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Note: Interest Income

SUBTOTAL of Receipts This Page (optional)

114.63

TOTAL This Period (last page this line number only)

11020370505

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 30

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

Full Name (Last, First, Middle Initial)

Wells Fargo

Mailing Address Post Office Box 230517

City

Montgomery

State

AL

Zip Code

36123-0517

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)▼

Election Cycle-to-Date ▼

11251.25

Date of Receipt

MM / DD / YYYY
09 / 06 / 2011

Transaction ID: 11007.C39519

Amount of Each Receipt this Period

271.78

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Note:Interest Income

Full Name (Last, First, Middle Initial)

Wells Fargo

Mailing Address Post Office Box 230517

City

Montgomery

State

AL

Zip Code

36123-0517

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)▼

Election Cycle-to-Date ▼

11290.01

Date of Receipt

MM / DD / YYYY
09 / 28 / 2011

Transaction ID: 11007.C39511

Amount of Each Receipt this Period

38.76

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Note:Interest Income

Full Name (Last, First, Middle Initial)

West Alabama Bank

Mailing Address 86 Court Square

City

Carrollton

State

AL

Zip Code

35447-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)▼

Election Cycle-to-Date ▼

5723.61

Date of Receipt

MM / DD / YYYY
09 / 15 / 2011

Transaction ID: 11006.C39505

Amount of Each Receipt this Period

1884.63

Other Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

NOTE:Interest Income

SUBTOTAL of Receipts This Page (optional) ▶

2195.17

TOTAL This Period (last page this line number only) ▶

5835.38

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

A.

Full Name (Last, First, Middle Initial)
116 Inc.

Mailing Address 234 Third Street NE

City Washington State DC Zip Code 20002-

Purpose of Disbursement
Dues

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7825
Date of Disbursement

07 / 05 / 2011

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

DUES

B.

Full Name (Last, First, Middle Initial)
116 Inc.

Mailing Address 234 Third Street NE

City Washington State DC Zip Code 20002-

Purpose of Disbursement
Dues

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7838
Date of Disbursement

08 / 22 / 2011

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

DUES

C.

Full Name (Last, First, Middle Initial)
116 Inc.

Mailing Address 234 Third Street NE

City Washington State DC Zip Code 20002-

Purpose of Disbursement
Dues

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7846
Date of Disbursement

09 / 06 / 2011

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

DUES

SUBTOTAL of Disbursements This Page (optional)

90.00

TOTAL This Period (last page this line number only)

11020370507

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

A.

Full Name (Last, First, Middle Initial)

Alabama Dept Of Revenue

Mailing Address Post Office Box 327483

City
Montgomery

State
AL

Zip Code
36132-7483

Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11007.E7877

Date of Disbursement

07 / 10 / 2011

Amount of Each Disbursement this Period

575.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL TAXES

B.

Full Name (Last, First, Middle Initial)

Alabama Dept Of Revenue

Mailing Address Post Office Box 327483

City
Montgomery

State
AL

Zip Code
36132-7483

Purpose of Disbursement
Income Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11007.E7878

Date of Disbursement

08 / 19 / 2011

Amount of Each Disbursement this Period

245.32

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

INCOME TAXES

C.

Full Name (Last, First, Middle Initial)

Dept. Of Industrial Relations

Mailing Address 649 Monroe Street

City
Montgomery

State
AL

Zip Code
36131-

Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11007.E7879

Date of Disbursement

07 / 10 / 2011

Amount of Each Disbursement this Period

195.75

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional) ▶

1016.07

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

Full Name (Last, First, Middle Initial)

Dept. Of Industrial Relations

Mailing Address 649 Monroe Street

City State Zip Code
Montgomery AL 36131-

Purpose of Disbursement
Assessment

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7840

Date of Disbursement

08 / 22 / 2011

Amount of Each Disbursement this Period

11.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

ASSESSMENT

Full Name (Last, First, Middle Initial)

American Express

Mailing Address P. O. Box 530001

City State Zip Code
Atlanta GA 30353-0001

Purpose of Disbursement
Credit Card-see below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7835

Date of Disbursement

08 / 03 / 2011

Amount of Each Disbursement this Period

1042.34

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD-SEE BELOW

Full Name (Last, First, Middle Initial)

Capitol City Brewing

Mailing Address 1100 New York Ave., NW

City State Zip Code
Washington DC 20001-

Purpose of Disbursement
Meals Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11006.E7857

Date of Disbursement

07 / 03 / 2011

Amount of Each Disbursement this Period

51.45

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS EXPENSE

SUBTOTAL of Disbursements This Page (optional)

1053.54

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

Full Name (Last, First, Middle Initial)

Old Ebbitt Grill

Mailing Address 675 15th NW

City
Washington

State
DC

Zip Code
20005-

Purpose of Disbursement

Meals Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11006.E7858

Date of Disbursement

07 / 10 / 2011

Amount of Each Disbursement this Period

68.30

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS EXPENSE

Full Name (Last, First, Middle Initial)

Restaurant Associates

Mailing Address 2nd & D Streets

City
Washington

State
DC

Zip Code
20515-

Purpose of Disbursement

Meals Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11006.E7856

Date of Disbursement

06 / 29 / 2011

Amount of Each Disbursement this Period

662.37

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS EXPENSE

Full Name (Last, First, Middle Initial)

Restaurant Associates

Mailing Address 2nd & D Streets

City
Washington

State
DC

Zip Code
20515-

Purpose of Disbursement

Meals Expense/Dining Rm

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11006.E7860

Date of Disbursement

06 / 21 / 2011

Amount of Each Disbursement this Period

97.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS EXPENSE/DINING
RM

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

A.

Full Name (Last, First, Middle Initial)

Union Pub

Mailing Address 201 Massachusetts Ave. NE

City
Washington

State
DC

Zip Code
20002-

Purpose of Disbursement
Meals Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11006.E7859

Date of Disbursement

07 / 20 / 2011

Amount of Each Disbursement this Period

98.84

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS EXPENSE

B.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address P. O. Box 530001

City
Atlanta

State
GA

Zip Code
30353-0001

Purpose of Disbursement
Credit Card-see below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7843

Date of Disbursement

08 / 31 / 2011

Amount of Each Disbursement this Period

636.97

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD-SEE BELOW

C.

Full Name (Last, First, Middle Initial)

America D C

Mailing Address Union Station

City
Washington

State
DC

Zip Code
20001-

Purpose of Disbursement
Meals Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11006.E7863

Date of Disbursement

07 / 30 / 2011

Amount of Each Disbursement this Period

136.83

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

636.97

TOTAL This Period (last page this line number only) ▶

11020370511

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

Full Name (Last, First, Middle Initial)

Johnny Rockets

Mailing Address Union Station

City
Washington

State
DC

Zip Code
20002-

Purpose of Disbursement
Meals Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11006.E7864

Date of Disbursement

07 / 31 / 2011

Amount of Each Disbursement this Period

50.36

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS EXPENSE

Full Name (Last, First, Middle Initial)

Johnny Rockets

Mailing Address Union Station

City
Washington

State
DC

Zip Code
20002-

Purpose of Disbursement
Meals Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11006.E7865

Date of Disbursement

08 / 01 / 2011

Amount of Each Disbursement this Period

36.45

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS EXPENSE

Full Name (Last, First, Middle Initial)

Johnnys Half Shell

Mailing Address 400 N Capitol St NW

City
Washington

State
DC

Zip Code
20001-1511

Purpose of Disbursement
Meals Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11006.E7868

Date of Disbursement

07 / 28 / 2011

Amount of Each Disbursement this Period

215.58

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

A.

Full Name (Last, First, Middle Initial)

Red Top Sedan Car Services

Mailing Address Jefferson Davis Highway

City
Arlington

State
VA

Zip Code
22201-

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11006.E7862

Date of Disbursement

MM / DD / YYYY
07 / 29 / 2011

Amount of Each Disbursement this Period

39.33

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: TRAVEL

B.

Full Name (Last, First, Middle Initial)

Restaurant Associates

Mailing Address 2nd & D Streets

City
Washington

State
DC

Zip Code
20515-

Purpose of Disbursement
Meals Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11006.E7867

Date of Disbursement

MM / DD / YYYY
08 / 09 / 2011

Amount of Each Disbursement this Period

59.94

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS EXPENSE

C.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address P. O. Box 530001

City
Atlanta

State
GA

Zip Code
30353-0001

Purpose of Disbursement
Credit Card-see below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7851

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2011

Amount of Each Disbursement this Period

2085.91

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD-SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

2085.91

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address P. O. Box 530001

City
Atlanta

State
GA

Zip Code
30353-0001

Purpose of Disbursement
Membership fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11006.E7873

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2011

Amount of Each Disbursement this Period

75.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEMBERSHIP FEE

Full Name (Last, First, Middle Initial)

B. Restaurant Associates

Mailing Address 2nd & D Streets

City
Washington

State
DC

Zip Code
20515-

Purpose of Disbursement
Meals Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11006.E7871

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2011

Amount of Each Disbursement this Period

59.94

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS EXPENSE

Full Name (Last, First, Middle Initial)

C. Restaurant Associates

Mailing Address 2nd & D Streets

City
Washington

State
DC

Zip Code
20515-

Purpose of Disbursement
Meals Expense

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11006.E7870

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2011

Amount of Each Disbursement this Period

1805.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MEALS EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

Full Name (Last, First, Middle Initial)

AT & T Mobility

Mailing Address P. O. Box 538695

City Atlanta State GA Zip Code 30353-8695

Purpose of Disbursement

Telephones/Blackberries

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7831

Date of Disbursement

07 / 28 / 2011

Amount of Each Disbursement this Period

485.73

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TELEPHONES/BLACKBERRIES

Full Name (Last, First, Middle Initial)

AT & T Mobility

Mailing Address P. O. Box 538695

City Atlanta State GA Zip Code 30353-8695

Purpose of Disbursement

Telephones/Blackberries

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7839

Date of Disbursement

08 / 22 / 2011

Amount of Each Disbursement this Period

282.11

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TELEPHONES/BLACKBERRIES

Full Name (Last, First, Middle Initial)

AT & T Mobility

Mailing Address P. O. Box 538695

City Atlanta State GA Zip Code 30353-8695

Purpose of Disbursement

Telephones/Blackberries

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7850

Date of Disbursement

09 / 29 / 2011

Amount of Each Disbursement this Period

307.63

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TELEPHONES/BLACKBERRIES

SUBTOTAL of Disbursements This Page (optional)

1075.47

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

A.

Full Name (Last, First, Middle Initial)

Anita Barrera

Mailing Address 3350 Boxwood Drive

City
Montgomery

State
AL

Zip Code
36111-

Purpose of Disbursement
Accounting Consultant

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7824

Date of Disbursement

MM / DD / YYYY
07 / 05 / 2011

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

ACCOUNTING CONSULTANT

B.

Full Name (Last, First, Middle Initial)

Blue Ridge Mountain Water

Mailing Address P. O. Box 1247

City
Wetumpka

State
AL

Zip Code
36092-

Purpose of Disbursement
Office Expense/Water

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7828

Date of Disbursement

MM / DD / YYYY
07 / 05 / 2011

Amount of Each Disbursement this Period

19.05

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

OFFICE EXPENSE/WATER

C.

Full Name (Last, First, Middle Initial)

Blue Ridge Mountain Water

Mailing Address P. O. Box 1247

City
Wetumpka

State
AL

Zip Code
36092-

Purpose of Disbursement
Office Expense/Water

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7833

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2011

Amount of Each Disbursement this Period

19.05

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

OFFICE EXPENSE/WATER

SUBTOTAL of Disbursements This Page (optional) ▶

1038.10

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

Full Name (Last, First, Middle Initial)

Blue Ridge Mountain Water

Mailing Address P. O. Box 1247

City
Wetumpka

State
AL

Zip Code
36092-

Purpose of Disbursement
Office Expense/Water

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7847

Date of Disbursement

M M / D D / Y Y Y Y
09 / 06 / 2011

Amount of Each Disbursement this Period

27.30

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

OFFICE EXPENSE/WATER

Full Name (Last, First, Middle Initial)

E donation 1 Account

Mailing Address 118 North Saint Asaph Street

City
Alexandria

State
VA

Zip Code
22314-

Purpose of Disbursement
Web fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7854

Date of Disbursement

M M / D D / Y Y Y Y
08 / 12 / 2011

Amount of Each Disbursement this Period

16.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

WEB FEE

Full Name (Last, First, Middle Initial)

E donation 1 Account

Mailing Address 118 North Saint Asaph Street

City
Alexandria

State
VA

Zip Code
22314-

Purpose of Disbursement
Web fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11006.E7855

Date of Disbursement

M M / D D / Y Y Y Y
09 / 15 / 2011

Amount of Each Disbursement this Period

0.80

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

WEB FEE

SUBTOTAL of Disbursements This Page (optional) ▶

44.10

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

Full Name (Last, First, Middle Initial)

Electronic Federal Tax Payment Systems

Mailing Address P. O. Box 173788

City State Zip Code
Denver CO 80217-3788

Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11007.E7874

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2011

Amount of Each Disbursement this Period

1088.90

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL TAXES

Full Name (Last, First, Middle Initial)

Electronic Federal Tax Payment Systems

Mailing Address P. O. Box 173788

City State Zip Code
Denver CO 80217-3788

Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11007.E7875

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2011

Amount of Each Disbursement this Period

1088.90

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL TAXES

Full Name (Last, First, Middle Initial)

Electronic Federal Tax Payment Systems

Mailing Address P. O. Box 173788

City State Zip Code
Denver CO 80217-3788

Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11007.E7876

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2011

Amount of Each Disbursement this Period

1088.90

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)

3266.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

Full Name (Last, First, Middle Initial)

Federal Express

Mailing Address Post Office Box 1140

City
Memphis

State
TN

Zip Code
38101-1140

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7830

Date of Disbursement

07 / 28 / 2011

Amount of Each Disbursement this Period

23.52

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SHIPPING

Full Name (Last, First, Middle Initial)

Knology

Mailing Address P. O. Box 830330

City
Birmingham

State
AL

Zip Code
35283-0330

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7826

Date of Disbursement

07 / 05 / 2011

Amount of Each Disbursement this Period

75.21

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TELEPHONE

Full Name (Last, First, Middle Initial)

Knology

Mailing Address P. O. Box 830330

City
Birmingham

State
AL

Zip Code
35283-0330

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7836

Date of Disbursement

08 / 03 / 2011

Amount of Each Disbursement this Period

75.12

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TELEPHONE

SUBTOTAL of Disbursements This Page (optional) ▶

173.85

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

Full Name (Last, First, Middle Initial)

Knology

Mailing Address P. O. Box 830330

City
Birmingham

State
AL

Zip Code
35283-0330

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7842

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2011

Amount of Each Disbursement this Period

75.12

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TELEPHONE

A.

Full Name (Last, First, Middle Initial)

Knology

Mailing Address P. O. Box 830330

City
Birmingham

State
AL

Zip Code
35283-0330

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7853

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2011

Amount of Each Disbursement this Period

75.12

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TELEPHONE

B.

Full Name (Last, First, Middle Initial)

Patton Boggs LLP

Mailing Address 2550 M Street, NW

City
Washington

State
DC

Zip Code
20037-

Purpose of Disbursement
Legal Compliance Work

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7844

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2011

Amount of Each Disbursement this Period

820.51

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

LEGAL COMPLIANCE WORK

C.

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

970.75

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

A. Full Name (Last, First, Middle Initial) Postmaster Mailing Address 6701 Winton Blount Blvd.	Transaction ID: 11003.E7848 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2011
City Montgomery State AL Zip Code 36119-9998 Purpose of Disbursement BRM Permit/Accounting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 795.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 BRM PERMIT/ACCOUNTING
B. Full Name (Last, First, Middle Initial) Phyllis Jones Spurlock Mailing Address 1242 Westmoreland Avenue City Montgomery State AL Zip Code 36106- Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼	Transaction ID: 11003.E7823 Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2011 Amount of Each Disbursement this Period 2378.55 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY
C. Full Name (Last, First, Middle Initial) Phyllis Jones Spurlock Mailing Address 1242 Westmoreland Avenue City Montgomery State AL Zip Code 36106- Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼	Transaction ID: 11003.E7832 Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2011 Amount of Each Disbursement this Period 2378.55 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY

SUBTOTAL of Disbursements This Page (optional)

5552.10

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 30

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

Full Name (Last, First, Middle Initial)

Phyllis Jones Spurlock

Mailing Address 1242 Westmoreland Avenue

City Montgomery State AL Zip Code 36106-

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7841

Date of Disbursement

09 / 01 / 2011

Amount of Each Disbursement this Period

2378.55

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

Wells Fargo

Mailing Address Post Office Box 230517

City Montgomery State AL Zip Code 36123-0517

Purpose of Disbursement
Bank Charge

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11007.E7880

Date of Disbursement

09 / 30 / 2011

Amount of Each Disbursement this Period

60.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

BANK CHARGE

Full Name (Last, First, Middle Initial)

Zelda Executive Suites

Mailing Address 2835 Zelda Road

City Montgomery State AL Zip Code 36106-

Purpose of Disbursement
Rent/Internet

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7829

Date of Disbursement

07 / 13 / 2011

Amount of Each Disbursement this Period

370.38

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

RENT/INTERNET

SUBTOTAL of Disbursements This Page (optional)

2808.93

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Sessions Senate Committee Inc.

A.

Full Name (Last, First, Middle Initial)

Zelda Executive Suites

Mailing Address 2835 Zelda Road

City
Montgomery

State
AL

Zip Code
36106-

Purpose of Disbursement
Rent/Internet

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7837

Date of Disbursement

08 / 03 / 2011

Amount of Each Disbursement this Period

370.38

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

RENT/INTERNET

B.

Full Name (Last, First, Middle Initial)

Zelda Executive Suites

Mailing Address 2835 Zelda Road

City
Montgomery

State
AL

Zip Code
36106-

Purpose of Disbursement
Rent/Internet

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 11003.E7845

Date of Disbursement

09 / 06 / 2011

Amount of Each Disbursement this Period

370.38

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

RENT/INTERNET

SUBTOTAL of Disbursements This Page (optional)

740.76

TOTAL This Period (last page this line number only)

20553.25

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

11020370523

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 10-11-11
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

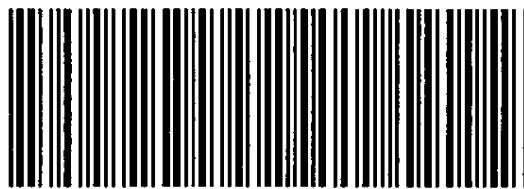
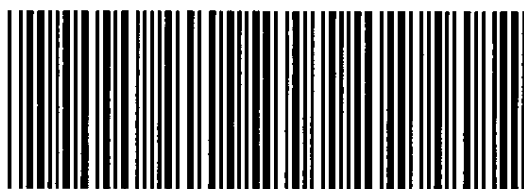
POSTMARK ILLEGIBLE ☐ NO POSTMARK ☐

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 10-11-11

11020370524



11020370525